71-06-Child Health

Fund/Agency: 001/71	Health Departme	ent
Personnel Services	\$2,960,262	
Operating Expenses	\$669,427	
Recovered Costs	\$0	CAPS Percentage of Agency Total
Capital Equipment	\$0	
Total CAPS Cost:	\$3,629,689	9.9%
Federal Revenue	\$0	
State Revenue	\$1,427,633	
User Fee Revenue	\$147,905	
Other Revenue	\$123,166	
Total Revenue:	\$1,698,704	90.1%
Net CAPS Cost:	\$1,930,985	■ Child Health □ All Other Agency CAPS
Positions/SYE involved in the delivery of this CAPS	54/54	Simulation Paris Other Agency CATS

► CAPS Summary

Child Health services provide preventive health programs to infants and children in an effort to reduce mortality and morbidity, prevent potentially handicapping conditions through early identification and intervention, and increase the immunization level to reduce vaccine preventable diseases. Programs provided under Child Health Services include Speech and Hearing, Immunizations, Healthy Families Fairfax (HFF) Infant/Preschool Case Management and Infant Development.

The population served in Child Health programs are becoming more culturally diverse, mirroring the changes in the County. This diversity poses special challenges in the provision of health care. Language and the ability to communicate are a major concern. In addition, unique cultural and religious beliefs impact how care is given and how receptive the client is to receiving care.

Speech and Hearing services promote health and functional, effective communication skills in children and are provided in the clinic and community setting. The program includes prevention services, education, diagnostics, referral and clinical intervention for communication disorders. The program provides intermediary care as children access the Fairfax County Public School System and provides therapy for those children who do not qualify for Public School services. The staff are responsible for evaluating and developing goals and treatment plans for clients; coordinating services with physicians and public school staff; and providing direct intervention. In addition, the staff also provide training to other Health Department staff on early identification of speech and hearing delays/losses, community outreach to families in need of services, and screenings in community settings.

Immunization services involve the giving of childhood vaccines and community education. The goal of the program is based on the Healthy People Year 2010 Goal to have immunizations completed for 90 percent of two-year-old children. The completion rate has risen from 58 percent in 1992 to 80 percent in 2000.

Healthy Families Fairfax (HFF) is a comprehensive program offering voluntary, in-home educational and support services to first-time parents at risk for child abuse. HFF is a partnership between two County agencies: Department of Family Services and the Health Department, and three non-profit community agencies: Northern Virginia Family Services, Reston Interfaith, and United Community Ministries. HFF is part of a national program, Healthy Families America and has received accreditation from them. A public health nurse works on a team with a social worker and paraprofessionals to provide intervention and support to families. The role of the public health nurse is to assess families for service, administer caretaker/child interaction assessments, provide developmental screening assessments and provide medical case management to high-risk children. In FY 2000, HFF staff made 1,436 home visits and over 3,000 office visits and telephone calls.

Both the Infant/Preschool case management and Infant Development programs provide monitoring, teaching and guidance to families in an effort to improve health outcomes and maximize each child's potential. In FY 2000, 5,328 home visits and over 11,100 office visits and telephone calls were made to provide services to clients in both these programs. All infants born to women who received maternity care through the Health Department receive a home visit to assess health status of the baby, and assure that the infant has a medical home for ongoing care. In addition, based on medical and/or psychosocial information, an assessment is made regarding the need for ongoing case management (e.g. failure to thrive, prematurity, teen parent, etc.). The Health Department also receives referrals from social workers and other community agencies.

The Infant Development Program is a part of a continuum of Early Intervention services. Infants who are at risk for developmental delays, but who are not eligible for services under the Community Services Board's Early Intervention Program (EIP), receive ongoing evaluation, home intervention and support in an effort to maintain and/or improve developmental status. Referral to EIP is made if the status changes and the child becomes eligible for services.

▶ Method of Service Provision

Speech and Hearing Services are provided at three Health Department field sites (Fairfax, Mt. Vernon and Herndon-Reston) and are by appointment only.

Immunization services are provided at all five Health Department field sites (Herndon-Reston, Falls Church, Mt. Vernon, Springfield and Fairfax) either on a walk-in or appointment basis. Each site provides 33 hours of walk-in services a week. Early morning hours (7:30 a.m.) and evening hours (until 6:00 p.m.) are offered one day a week each. The hours of available appointments at each site depends on the caseload, with clients having choice of morning or afternoon appointments. Special immunization clinics are often held at various community sites (churches, health fairs, schools, etc.)

Health Families Fairfax, Infant/Preschool and Infant Development services are provided in the home and community setting. Services are generally 8:00 a.m. to 4:30 p.m. However, based on family needs, visits can be made before or after core business hours.

Performance/Workload Related Data

Title	FY 1998 Actual	FY 1999 Actual	FY 2000 Actual	FY 2001 Estimate	FY 2002 Estimate
Speech					
Number of client visits	*	4,123	5,140	5,500	5,500
Percent discharged as corrected; no follow-up needed	*	*	(19.3%)	25%	27%
Immunizations					
Number seen	21,200	17,624	18,194	29,000**	29,000**
Number given	41,512	37,803	42,128	65,000**	65,000**
2-year old completion rate	81%	74%	81%	83%	90%

^{*}Data not previously collected.

Note: Infant/preschool measures have been developed for use in FY 2002.

Mandate Information

This CAPS is Federally or State mandated. The percentage of this CAPS' resources utilized to satisfy the mandate is 76 - 100%. The specific Federal or State code and a brief description of the code follows:

- Code of Virginia 22.1-270, 32.1-11, 32.1-65 through 32.1-68, 32.1-77
- PL94-10, Social Security Act, Title V, and State Department of Health agreement with local government.

^{**}Increase due to new vaccines for infants and requirement for Hepatitis B for school entry.

▶ User Fee Information

Subobject			FY 2002 ABP		
Code	Fee Title		Fee Total		
0658	Speech		\$66,664		
	Current Fee Maximum Allowable		Fee Amount		
Speech fees are	on a sliding scale.	Fees are set in accordance with the Virgin State Board of Health.			
	Purpose of Fee: To offset the cost of service.				
Levy			Year Fee Was		
Authority	Requirements to Change the Fee Last Adjusted				
Board of Health	Yearly review of fee structure.		2001		
Other Remarks:					
These fees were previously included in 0673 and in FY 2002 we established two new codes to accommodate these fees.					

Subobject			FY 2002 ABP
Code	Fee Title		Fee Total
0659	Hearing		\$23,240
Current Fee		Maximum Allowable Fee Amount	
Hearing fees are on a sliding scale.		Fees are set in accordanc State Board of Health.	e with the Virginia

Purpose of Fee:

To offset the cost of service.

Levy		Year Fee Was
Authority	Requirements to Change the Fee	Last Adjusted
Board of	Yearly review of fee structure.	2001
Health		

Other Remarks:

These fees were previously included in 0673 and in FY 2002 we established two new codes to accommodate these fees.

Subobject Code	Fee Title		FY 2002 ABP Fee Total	
0673	Non-Medicaid school PE fees		\$1,083	
Current Fee Maximum Allowable			Fee Amount	
\$25 actual fee paid is based on eligibility Same as current fee.				
Purpose of Fee: To offset cost of service.				
Levy Authority	Requirements to	Change the Fee	Year Fee Was Last Adjusted	
State Board of As determined by Board of Health. 1999 Health			1999	
Other Remarks: To account for non-Medicaid school physical exams and physical therapy fees.				

Subobject			FY 2002 ABP		
Code	Fee T	itle	Fee Total		
0672	Medicaid-PE/IMM Admin Fees		\$52,272		
	Current Fee Maximum Allowable		Fee Amount		
\$11		Same as current fee.			
Purpose of Fee:	Purpose of Fee:				
To account for in	To account for immunization administrative fees, and some school physical exams.				
Levy			Year Fee Was		
Authority	Requirements to	Change the Fee	Last Adjusted		
State Board of	As determined by Board of He	ealth.	1999		
Health					
Other Remarks:					

Subobject			FY 2002 ABP		
Code	Fee T	itle	Fee Total		
0670	Child Health		\$3,134		
	Current Fee	Maximum Allowable	Fee Amount		
\$25 actual fee based on eligibility Same as current fee.					
Purpose of Fee:	Purpose of Fee:				
To offset cost of	To offset cost of services per pediatric clinics				
Levy			Year Fee Was		
Authority	Requirements to	Change the Fee	Last Adjusted		
State Board of	As determined by Board of Health.		1999		
Health					
Other Remarks:					
1					

Subobject			FY 2002 ABP		
Code	Fee Title		Fee Total		
0669	Medicaid Baby Home Tomorro	OW	\$1,512		
	Current Fee	Maximum Allowable	Fee Amount		
\$88		Same as current fee.			
Purpose of Fee:					
To offset cost of	To offset cost of service and to account for revenue for baby care which we bill to Medicaid				
for the Home To	for the Home Tomorrow Program.				
Levy			Year Fee Was		
Authority	Requirements to Change the Fee		Last Adjusted		
State Board of	As determined by Board of Health.		1999		
Health					
Other Remarks:					